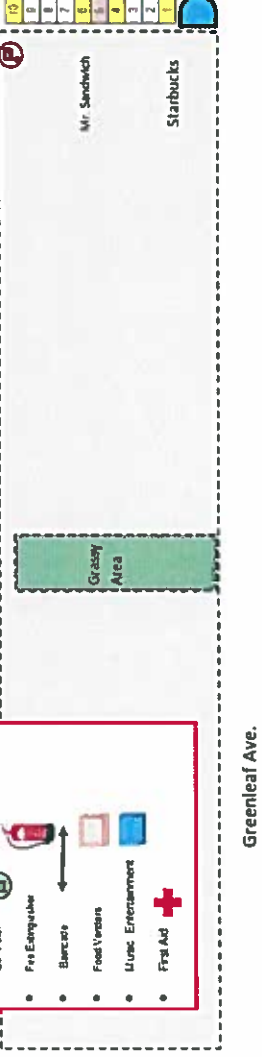
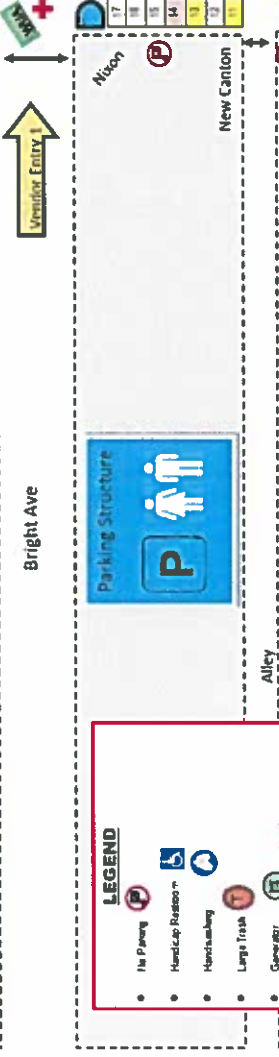
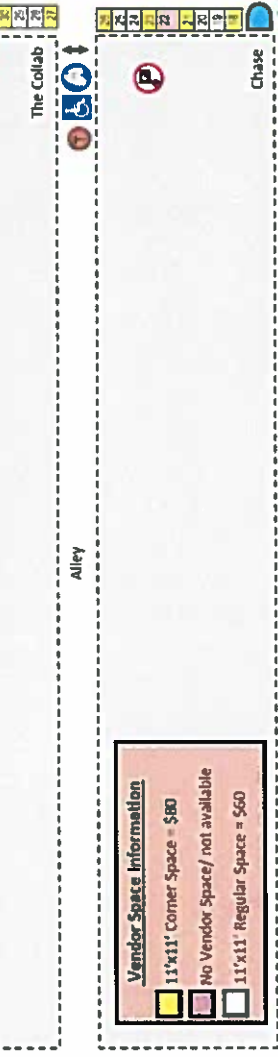




## **Advertiser Rules & Regulations**

No loud music is allowed. Rain or shine, the event will go on. No refunds/credits will be given under any circumstances. If you do not show up, you will not receive a refund. No sub-leasing or re-selling of space is allowed. Set up is between 6:00 – 8:30 am. You must be set up in your space and have vehicles removed by 8:30 am. You will be denied vehicle entry after 8:00 am and lose your space after 9:00 am with no refunds. Official show hours are 9:00 am to 3:00 pm. Philadelphia Street will be reopened at 3:00 pm for move out. No vehicles may enter prior to this time. Do NOT pack up prior to 3:00 pm, as this will reduce the effectiveness of the street faire and is unfair to sellers and buyers alike. You must be packed and off the street by 4:30 pm. Streets will be reopened at 5:00 pm. Please remove all merchandise, trash, and packing material brought in for sale. Failure to comply will result in a \$100 clean-up charge.

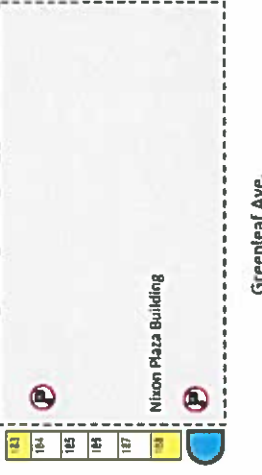
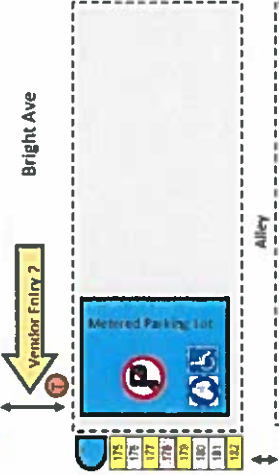
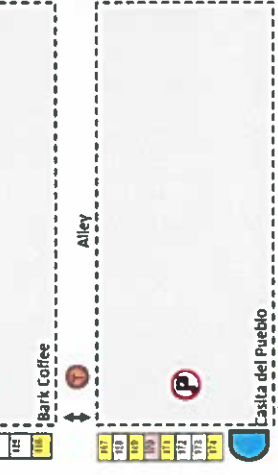
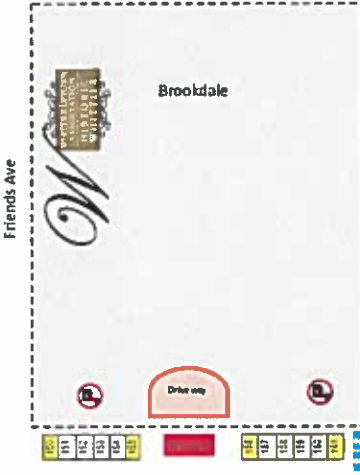
# 2019 Whittier Uptown Association Annual Spring Art & Antique Fair, Saturday, April 6, 2019 Map & Layout



**Vendor Space Information**

- 11'x11' Corner Space = \$80
- No Vendor Space/ not available
- 11'x11' Regular Space = \$60

- LEGEND**
- Icon: Parking (P)
  - Icon: Handicap Restroom
  - Icon: Handwashing
  - Icon: Large Trash
  - Icon: Generator
  - Icon: Fire Extinguisher
  - Icon: Benches
  - Icon: Food Vendors
  - Icon: Music/Entertainment
  - Icon: Fire Ad



Philadelphia Street

Workman St

Greenleaf Ave.

Greenleaf Ave.



City of Whittier

13230 Penn Street, Whittier, CA 90602-1772

(562) 567-9880

License # \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_

Event Name: \_\_\_\_\_

### Special Events/One Day Photographer Business License Application

Please answer all questions as completely as possible and sign.

#### Business Information

Business Name/DBA: \_\_\_\_\_

Business Address (No PO Boxes): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: (\_\_\_\_) \_\_\_\_\_ Federal ID #: \_\_\_\_\_ Resale # \_\_\_\_\_

Business Description/Products Sold: \_\_\_\_\_

#### Ownership Information

(Check One):  Sole Owner  Partnership  Corporation

Owner's Name (President if Corp): \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ SSN or FEIN #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

#### PLEASE SIGN AND DATE YOUR BUSINESS LICENSE APPLICATION

I declare under penalty of perjury that this application has been examined by me and to the best of my knowledge and belief, is a true, correct and complete statement of facts.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Choose one in each section

Dollar amount of Choice

<input type="checkbox"/>	Business License Tax 1-3 days at \$15 per day	
<input type="checkbox"/>	Business License Tax for 4 or more days \$50	

<input type="checkbox"/>	New Application Fee \$15	
<input type="checkbox"/>	Renewal Fee \$10	

<input checked="" type="checkbox"/>	Disability Access Fee \$4	\$4.00
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Total: \_\_\_\_\_